



January 15, 2025

RE: Scholarships **APPLICATION DEADLINE: February 28, 2025**

Dear School Counselor:

The Clarion Hospital Foundation is once again pleased to offer seven \$1,000.00 healthcare scholarships and two different \$1,000 nursing scholarships (ASN & BSN).

The enclosed materials contain eligibility requirements, applications, and flyers to post. Please make this information available to interested students. Only **one** application needs to be completed to be considered for the health care scholarships. The nursing scholarship application is a separate form. You can also visit <https://www.independence.health/.../clarion.../scholarships/> for an application and additional information. If you have any questions, please call me at (814) 226-1258.

Thank you for your cooperation in encouraging your students to pursue this great opportunity.

Sincerely,

Bridget Thornton
Development/Community Health Manager



Scholarships

INTERESTED IN A HEALTH CARE PROFESSION?

Clarion Hospital Foundation is looking for applicants for our 2025 Scholarships. This year we are awarding seven \$1,000.00 scholarships.

\$1000 Dr. John E. Brooks Memorial Scholarship was created by his family to honor his memory to benefit local students furthering their education in the field of health care.

2 - \$1000 Joseph and Helen Miller Memorial Scholarships were established by the Foundation in honor of the Miller Family.

2 - \$1,000 Fran Shope Memorial Scholarships to aid students in the medical field.

\$1,000 James B. Alexander Memorial Scholarship for the student with the best essay.

\$1,000 Dr. John L. Johnston Memorial Scholarship awarded to a student who is enrolled in or accepted to a medical school.

The scholarships will be paid directly to the school of the student's choice in August

To be eligible, students must meet the following criteria:

- ❖ Be a graduate or future graduate of a Clarion County high school
- ❖ Be accepted to a school of post-secondary health care education
- ❖ Have a grade point average of 3.0 or equivalent in the final three years of high school
- ❖ Plan to pursue their education in nursing, inhalation therapy, lab technology, radiology, physical therapy, occupational therapy, medical technology, or other medical field.

Mail Completed Applications To:

Clarion Hospital Foundation
1 Hospital Drive
Clarion PA, 16214

Applications must be postmarked or delivered to the foundation by FEBRUARY 28, 2025

For More Information Contact Clarion Hospital Foundation at 814-226-1258,

Find us on Facebook – Clarion Hospital Foundation, or online at

<https://www.butlerhealthsystem.org/clarion-hospital/services/clarion-hospital-foundation/scholarships/>



JOHN E. BROOKS SCHOLARSHIP
FRAN SHOPE MEMORIAL SCHOLARSHIP

JOSEPH & HELEN MILLER SCHOLARSHIP
JAMES B. ALEXANDER MEMORIAL SCHOLARSHIP

(It is only necessary to complete one application for all scholarships)

Persons interested in applying for the Clarion Hospital Foundation's Scholarships listed above are to complete the application form below and submit the completed form, **with the listed criteria**, no later than **February 28, 2025** to:

Clarion Hospital Foundation
One Hospital Drive
Clarion, PA 16214
Attention: Bridget Thornton

Name (last) (first) (middle initial)

Street or Box Number

City **State** **ZIP**

Phone Number

Borough or Township of Residence

High School **Year of Graduation**

If you must answer **NO** to any one of the first three questions, **do not** submit this application for consideration.

1. Are you graduate, or will you be a future graduate of a Clarion County high school?

2. Are you accepted to a school of post-secondary health care education?

3. Can you provide documentation to establish your class standing and quality point average (**3.0** or equivalent for the past 3 years)?

4. List below the extra-curricular and civic activities in which you have participated. (include on a separate sheet if necessary)

Activity

Offices Held or Honors Received

- a. _____
- b. _____
- c. _____
- d. _____

5. Please check below the area of health care education you plan to pursue.

___ Nursing RN (B.S.) /LPN

___ Physician/PA

___ Medical Technology Degree

___ Radiology

___ Lab Tech
Histologist/Cytotechnologist

___ Nuclear Medicine

___ Inhalation Therapy

___ Pharmacy

___ **Other health-related field** approved by the Foundation Committee (specify)

6. What school have you been accepted for post-secondary health care education?

7. Name of Medical School attending or accepted to? (*John Johnston Scholarship Only*)

8. **After checking one of the above, please tell in your own words, on a separate sheet of paper, why you want to pursue a career in that health care profession. *The James B. Alexander Scholarship will be awarded for the best essay.***

9. Include **two (CURRENT)** letters of recommendation with this application.

10. Please include **your class rank, quality point average (QPA-MUST BE 3.0 OR equivalent), and an official copy of your high school transcripts. If you are currently attending college or a post-secondary school, please also submit your QPA and an official copy of transcripts for the school that you are currently attending.**

Date

Applicant's Signature

Guidance Counselor's Recommendation: ___ yes ___ no (High School Applicants only)

Date

Guidance Counselor Signature (High School Applicants only)